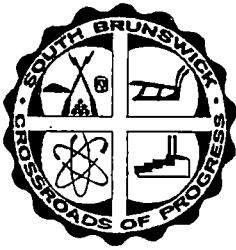


# EXHIBIT G



# TOWNSHIP OF SOUTH BRUNSWICK

Municipal Building • P.O. Box 190 • Monmouth Junction, NJ 08852-0190

Phone
732-329-4000
X7311
Fax
732-329-9026

March 23, 2010

Larissa DeGraw  
Technical Assistant  
NJ Council on Affordable Housing  
P.O. Box 813  
Trenton, NJ 08625-0813

Re: Municipal Claim for Reimbursement from the State of NJ for Refunded Non-Residential  
Development Fees Under P.L. 2009, c.90

Dear Ms. DeGraw:

Enclosed please find the reimbursement form and supporting documentation on behalf of the Township of South Brunswick.

Thank you for your considerations in this matter. If you have any questions or comments, please do not hesitate to contact my office.

Very truly yours,

Matthew U. Watkins  
Township Manager

MUW/lw  
Enclosures

Date:

**CERTIFICATION OF FUNDS**

I hereby certify the funds are available and encumbered.

*[Signature]*

FINANCE DEPARTMENT

PRINT DATE: 10/13/2009

VENDOR NO: 28

4484 ROUTE 27, LLC  
P.O. BOX 446  
PRINCETON, NJ 08542-0446

**TOWNSHIP OF SOUTH  
BRUNSWICK**

P.O. Box 190  
Monmouth Junction, NJ 08852-0190  
TEL (732)-329-4000 FAX (732)-274-8864

**VOUCHER/PURCHASE ORDER**

No. **200903505**

THIS NUMBER MUST APPEAR ON ALL PACKAGES,  
PAPERS AND CORRESPONDENCE

STATE CONTRACT ☐ No.

PURCHASE ORDER DATE: 10/13/2009

TWP. ATTORNEY'S OFFICE  
SOUTH BRUNSWICK TOWNSHIP  
540 RIDGE ROAD  
MONMOUTH JUNCTION, NJ 08852

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	1. NON-RESIDENTIAL DEVELOPMENT FEE REFUND		2,195.00
			2,195.00

**NOTICE TO VENDOR**

NO CHANGES MAY BE MADE IN ANY PROVISION OF THIS PURCHASE ORDER WITHOUT THE WRITTEN NOTICE TO THAT EFFECT ISSUED BY THE TOWNSHIP. SUBSTITUTIONS MUST NOT BE MADE. IF UNABLE TO FILL ORDERS EXACTLY IN ACCORDANCE WITH QUANTITY, DESCRIPTION AND PRICE - NOTIFY TOWNSHIP IMMEDIATELY.

CONTRACT ORDERS ARE SUBJECT TO ALL TERMS AND CONDITIONS OF THE ACCEPTED BID AND EXECUTED CONTRACT. INFORMAL AWARDS (OPEN MARKET ORDERS RESULTING FROM ADVERTISED PROPOSALS) ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE ACCEPTED BID. NO ORDER VALID UNLESS SIGNED BELOW.

**DEPARTMENT HEAD CERTIFICATION**

I, having knowledge of the facts certify that the materials and supplies have been received or the services rendered; said certifications being based on signed delivery slips or other reasonable procedures.

*[Signature]*  
SIGNATURE  
11/17/09  
DATE

**APPROVAL FOR PAYMENT**

**SIGN AND RETURN VOUCHER FOR PAYMENT**

DATE TWP. MANAGER  
DATE FINANCE

THIS PURCHASE IS EXEMPT BY STATUTE FROM PAYMENT OF ALL OR FEDERAL, STATE AND MUNICIPAL EXCISE, SALES, OR OTHER TAXES

**EXEMPT FROM N.J. SALES TAX #22- 6002306**

FUND/APPROPRIATION	AMOUNT
32- 9999- 0000- 0000- 2-288305	2,195.00
	2,195.00

**CLAIMANT'S CERTIFICATION AND DECLARATION**

I do solemnly declare and certify under the penalties of law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons with the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

*[Signature]* 11-17-09  
SIGNATURE DATE  
MANABIAN MEMBER TITLE

**PURCHASE ORDER AUTHORIZATION**

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

*[Signature]* 10/13/2009  
PURCHASING AGENT DATE

DATE PAID

CHECK NO

VOUCHER COPY-SIGN AT X AND RETURN FOR PAYMENT

**STATE OF NEW JERSEY  
NON-RESIDENTIAL DEVELOPMENT FEE CLAIM FORM**

**SECTION A (To be completed by developer):**

**Developer**

Name of Developer:	4424 ROUTE 27, LLC		
Address:	P.O. Box 446 PRINCETON, NJ 08542-0446		
Phone:	609-424-4009	Fax:	609-984-5446
E-mail:	JPERKOWSKI@TERRAMOMA.COM		

**Property Location**

County:	MIDDLESEX	Municipality:	So. BRUNSWICK	Block:	104	Lot:	3	Qual.:	
Street Address:	4424 ROUTE 27								
Construction Permit Application Number:	07-1346								

**Approval Dates**

Date on which developer received preliminary site plan approval (If applicable)	
Date on which developer received final site plan approval (If applicable)	7/27/06
If approval was granted prior to July 17, 2008, development fee % required at approval	% A1
If approval was granted prior to July 17, 2008, fee amount (E5 or F5 from Form NRDF x A1 above)	\$ A2
Date on which developer was referred to a planning board by the state, a governing body, or other public agency for review (If applicable)	
Date on which building permit was issued (If applicable)	7/23/07
Date on which final Certificate of Occupancy was issued (If applicable) Attach copy of final Certificate of Occupancy.	8/12/08

**Payment(s)**

	Amount	Date	Time of Payment (check one)		Method of Payment (check one)			
			Building Permit	CO	Cash	Check	Online	Money Order
A3	\$	8/12/08	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A4	\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A5	\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Payments:	\$	10,395.-	A6 (A3+A4+A5)
Amount Committed Prior to July 17, 2008	\$	8,700.-	A7 (From A2)
Amount of Claim	\$	2,195.-	A8 (A6 - A7)

Attach copy of Receipt or Certificate of Payment. No claim will be accepted without proof of payment attached.

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer/Claimant:			
Name:	Raul Momo		
Title:	MANAGING MEMBER	Date:	11/17/09

**SECTION B**

Total Payments Received:	\$		B1
Amount Committed Prior to July 17, 2008	\$		B2
Amount of Claim	\$		B3 (B1 - B2)
Signature:			
Name:			
Title:		Date:	

4484

STATE OF NEW JERSEY  
NON-RESIDENTIAL DEVELOPMENT FEE CERTIFICATION/EXEMPTION

SECTION A (To be completed by developer):

Developer

Name of Developer:	4484 Route 27, LLC
Address:	4484 Route 27, Livingston, NJ 08528
Phone:	609-924-4609
Fax:	609-924-4609
E-mail:	Rmomo@Telcamomo.com

Property Location

County:	Middlesex	Municipality:	South Brunswick	Block:	104	Lot:	3	Qual.:	
Street Address:	4484 Route 27								
Construction Permit Application Number:	07-1346								
Date on which Developer first sought construction or demolition permit (section 37 of P.L. 2008 c. 46)	7-23-07								

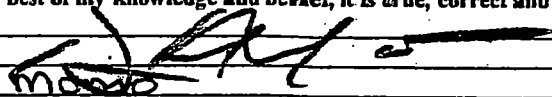
Exemption Category [Section Citation of P.L. 2008 c. 46] Check one if appropriate

<input type="checkbox"/> Non-profit Educational Purposes [35b]	<input type="checkbox"/> Transit Hub [35b.(4)]
<input type="checkbox"/> House of Worship [35b]	<input type="checkbox"/> Transit Village [35b.(6)]
<input type="checkbox"/> Parking lots and structures [35b.(1)]	<input type="checkbox"/> Transit Hub-Light Rail [35b.(5)]
<input type="checkbox"/> Non-profit hospital relocation or improvement [35b.(3)]	<input type="checkbox"/> Public amenity (recreational, community, senior centers) [35b.(2)] (Attach Planning Board approval)

Non exempt status [Section citation] Check one if appropriate

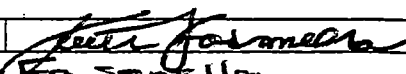
<input checked="" type="checkbox"/> Prior payment or commitment for low and moderate income housing [37c]	Amount paid:	\$
<input type="checkbox"/> Non-residential planned development, subject to a development or redevelopment agreement entitled to a 1% fee [37a.(2)]		
<input type="checkbox"/> Full Fee Due (2.5%)		

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer:				
Name:	Raoul Momo			
Title:	MANAGING MEMBER		Date:	8/13/08

SECTION B (To be completed by assessor):

	Estimated		Final
Assessed Value	\$	E1	\$ 607,400 F1
Director's Ratio	%	E2	47.04 % F2
Equalized Assessed Value	\$	E3	\$ 1,291,200 F3
Existing Equalized Assessed Value	\$	E4	\$ 855,400 F4
Amount on Which Fee is Calculated	\$	E5 (E3-E4)	\$ 435,800 F5 (F3-F4)
Non-residential Development Fee	\$	E6 (E5 X 2.5%)	\$ 10,895 F6 (F5 x 2.5%)


Signature of Assessor:				
Name:	Keith Fasanello		Exempt:	<input type="checkbox"/>
Date:	8/13/08			

SECTION C (To be completed by municipality)

Payment Amount:	\$	Amount should equal E6 or F6	
Payment received by ( name):			
Signature:			
Name:			
Title:		Date:	

Twp of So Bruns.

V-40012

<b>CERTIFICATION OF FUNDS</b>
I hereby certify the funds are available and encumbered.

FINANCE DEPARTMENT
PRINT DATE: 10/13/2009

VENDOR NO: 69625

CRP INDUSTRIES  
1 MINUE STREET  
CARTERET, NJ 07008

# **TOWNSHIP OF SOUTH BRUNSWICK**

P. O. Box 190  
Monmouth Junction, NJ 08852-0190  
TEL (732)-329-4000 FAX (732)-274-8864.

<b>VOUCHER/PURCHASE ORDER</b>
No. <b>200903515</b>
THIS NUMBER MUST APPEAR ON ALL PACKAGES, PAPERS AND CORRESPONDENCE

STATE CONTRACT ☐ No.

PURCHASE ORDER DATE: 10/13/2009

TWP. ATTORNEY'S OFFICE  
SOUTH BRUNSWICK TOWNSHIP  
540 RIDGE ROAD  
MONMOUTH JUNCTION, NJ 08852

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	1. NON-RESIDENTIAL DEVELOPMENT FEE REFUND		148,750.00
			148,750.00

## **NOTICE TO VENDOR**

NO CHANGES MAY BE MADE IN ANY PROVISION OF THIS PURCHASE ORDER WITHOUT THE WRITTEN NOTICE TO THAT EFFECT ISSUED BY THE TOWNSHIP. SUBSTITUTIONS MUST NOT BE MADE. IF UNABLE TO FILL ORDERS EXACTLY IN ACCORDANCE WITH QUANTITY, DESCRIPTION AND PRICE - NOTIFY TOWNSHIP IMMEDIATELY

CONTRACT ORDERS ARE SUBJECT TO ALL TERMS AND CONDITIONS OF THE ACCEPTED BID AND EXECUTED CONTRACT. INFORMAL AWARDS (OPEN MARKET ORDERS RESULTING FROM ADVERTISED PROPOSALS) ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE ACCEPTED BID. NO ORDER VALID UNLESS SIGNED BELOW.

## **DEPARTMENT HEAD CERTIFICATION**

I, having knowledge of the facts certify that the materials and supplies have been received on the services rendered.; said certifications being based on signed delivery slips or other reasonable procedures.

## **APPROVAL FOR PAYMENT**

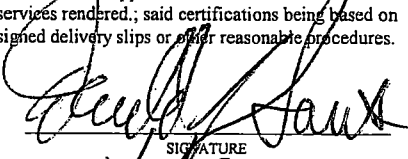
## **SIGN AND RETURN VOUCHER FOR PAYMENT**

DATE TWP. MANAGER

DATE FINANCE

THIS PURCHASE IS EXEMPT BY STATUTE FROM PAYMENT OF ALL OR FEDERAL, STATE AND MUNICIPAL EXCISE, SALES, OR OTHER TAXES

**EXEMPT FROM N.J. SALES TAX #22- 6002306**

  
SIGNATURE  
11/2/09  
DATE

FUND/APPROPRIATION	AMOUNT
32- 9999- 0000- 0000- 2-288305	148,750.00
	148,750.00

## **CLAIMANT'S CERTIFICATION AND DECLARATION**

I do solemnly declare and certify under the penalties of law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons with the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

X

SIGNATURE

19 OCT 04  
DATE


PRESIDENT  
TITLE

DATE PAID

CHECK NO

## **PURCHASE ORDER AUTHORIZATION**

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW



10/13/2009

PURCHASING AGENT

DATE

VOUCHER COPY-SIGN AT X AND RETURN FOR PAYMENT

Page 1 of 1

**STATE OF NEW JERSEY  
NON-RESIDENTIAL DEVELOPMENT FEE CLAIM FORM**

**SECTION A (To be completed by developer):**

**Developer**

Name of Developer: CRP Industries, Inc.			
Address: 35 Commerce Drive, Cranbury, NJ 08512			
Phone: 609-578-4100	Fax:	E-mail: dschilge@crpindustries.com	

**Property Location**

County: Middlesex	Municipality: South Brunswick	Block: 7	Lot: 13.082	Qual.:
Street Address: 35 Commerce Drive				
Construction Permit Application Number: 20081570				

**Approval Dates**

Date on which developer received preliminary site plan approval (If applicable)	
Date on which developer received final site plan approval (If applicable) preliminary & final	10-15-2008
If approval was granted prior to July 17, 2008, development fee % required at approval	% A1
If approval was granted prior to July 17, 2008, fee amount (E5 or F5 from Form NRDF x A1 above)	\$ A2
Date on which developer was referred to a planning board by the state, a governing body, or other public agency for review (If applicable)	
Date on which building permit was issued (If applicable)	9-24-2008
Date on which final Certificate of Occupancy was issued (If applicable) Attach copy of final Certificate of Occupancy.	

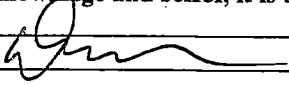
**Payment(s)**

	Amount	Date	Time of Payment (check one)		Method of Payment (check one)			
			Building Permit	CO	Cash	Check	Online	Money Order
A3	\$148,750.00	4-14-2009	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A4			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A5	\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Payments:	\$ 148,750.00	A6 (A3+A4+A5)
Amount Committed Prior to July 17, 2008	\$ 0	A7 (From A2)
<b>Amount of Claim</b>	<b>\$ 148,750.00</b>	<b>A8 (A6 - A7)</b>

**Attach copy of Receipt or Certificate of Payment. No claim will be accepted without proof of payment attached.**

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer/Claimant: 	
Name: Daniel Schilge	
Title: President	Date: 9/23/09

**SECTION B**

Total Payments Received:	\$	B1
Amount Committed Prior to July 17, 2008	\$	B2
Amount of Claim	\$	B3 (B1 - B2)
Signature:		
Name:		
Title:	Date:	



**STATE OF NEW JERSEY  
NON-RESIDENTIAL DEVELOPMENT FEE CERTIFICATION/EXEMPTION**

**SECTION A (To be completed by developer):**

**Developer**

Name of Developer:	CRP INDUSTRIES		
Address:	1 MINUE STREET, CARTERET, NJ 07008		
Phone:	732-969-2200	Fax:	
E-mail:			

**Property Location**

County:	MIDDLESEX	Municipality:	SOUTH BRUNSWICK	Block:	7	Lot:	13.082	Qual.:	
Street Address:	35 COMMERCE DRIVE								
Construction Permit Application Number:	20081570								
Date on which Developer first sought construction or demolition permit (section 37 of P.L. 2008 c. 46)	06-20-08								

**Exemption Category [Section Citation of P.L. 2008 c. 46] Check one if appropriate**

<input type="checkbox"/> Non-profit Educational Purposes [35b]	<input type="checkbox"/> Transit Hub [35b.(4)]
<input type="checkbox"/> House of Worship [35b]	<input type="checkbox"/> Transit Village [35b.(6)]
<input checked="" type="checkbox"/> Parking lots and structures [35b.(1)] <i>see attached</i>	<input type="checkbox"/> Transit Hub-Light Rail [35b.(5)]
<input type="checkbox"/> Non-profit hospital relocation or improvement [35b.(3)]	<input type="checkbox"/> Public amenity (recreational, community, senior centers) [35b.(2)] (Attach Planning Board approval)

**Non exempt status [Section citation] Check one if appropriate**

<input checked="" type="checkbox"/> Prior payment or commitment for low and moderate income housing [37c]	Amount paid:	\$ -0-
<input type="checkbox"/> Non-residential planned development, subject to a development or redevelopment agreement entitled to a 1% fee [37a.(2)]		
<input type="checkbox"/> Full Fee Due (2.5%)		

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer:	<i>[Signature]</i>		
Name:	KEVIN STOCK		
Title:	VP of Finance	Date:	4/6/09

**SECTION B (To be completed by assessor):**

	Estimated		Final	
Assessed Value	\$	E1	\$ 2,809,600	F1
Director's Ratio	%	E2	47.22%	F2
Equalized Assessed Value	\$	E3	\$ 5,950,000	F3
Existing Equalized Assessed Value	\$	E4	\$ -0-	F4
Amount on Which Fee is Calculated	\$	E5 (E3-E4)	\$ 5,950,000	F5 (F3-F4)
Non-residential Development Fee	\$	E6 (E5 X 2.5%)	\$ 148,750	F6 (F5 x 2.5%)

Signature of Assessor:	<i>[Signature]</i>		
Name:	Keith Fasanella	Exempt:	<input type="checkbox"/>
Date:	4/14/09		

**SECTION C (To be completed by municipality)**

Payment Amount:	\$ 148,750.00	Amount should equal E6 or F6
Payment received by (name):	<i>[Signature]</i>	
Signature:	<i>[Signature]</i>	
Name:	Adam...	
Title:	Adm. Sec.	Date: 4-14-09

**CERTIFICATION OF FUNDS**

I hereby certify the funds are available and encumbered.

*goy P Mon*

FINANCE DEPARTMENT

PRINT DATE: 10/13/2009

VENDOR NO: 482928

**TOWNSHIP OF SOUTH BRUNSWICK**

P. O. Box 190  
 Monmouth Junction, NJ 08852-0190  
 TEL (732)-329-4000. FAX (732)-274-8864.

**VOUCHER/PURCHASE ORDER**

No. **200903504**

THIS NUMBER MUST APPEAR ON ALL PACKAGES, PAPERS AND CORRESPONDENCE

STATE CONTRACT ☐ No.

PURCHASE ORDER DATE: 10/13/2009

VENDOR

S/K STOUTS 3 ASSOCIATES,  
 P.O. BOX 6872  
 BRIDGEWATER, NJ 08807

SUPPLIER

TWP. ATTORNEY'S OFFICE  
 SOUTH BRUNSWICK TOWNSHIP  
 540 RIDGE ROAD  
 MONMOUTH JUNCTION, NJ 08852

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	1. NON-RESIDENTIAL DEVELOPMENT FEE REFUND		33,500.00
			33,500.00

**NOTICE TO VENDOR**

NO CHANGES MAY BE MADE IN ANY PROVISION OF THIS PURCHASE ORDER WITHOUT THE WRITTEN NOTICE TO THAT EFFECT ISSUED BY THE TOWNSHIP. SUBSTITUTIONS MUST NOT BE MADE. IF UNABLE TO FILL ORDERS EXACTLY IN ACCORDANCE WITH QUANTITY, DESCRIPTION AND PRICE - NOTIFY TOWNSHIP IMMEDIATELY

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**DEPARTMENT HEAD CERTIFICATION**

I, having knowledge of the facts certify that the materials and supplies have been received or the services rendered.; said certifications being based on signed delivery slips or other reasonable procedures.

**APPROVAL FOR PAYMENT**

**SIGN AND RETURN VOUCHER FOR PAYMENT**

DATE TWP. MANAGER

DATE FINANCE

THIS PURCHASE IS EXEMPT BY STATUTE FROM PAYMENT OF ALL OR FEDERAL, STATE AND MUNICIPAL EXCISE, SALES, OR OTHER TAXES

**EXEMPT FROM N.J. SALES TAX #22- 6002306**

*Steve J. Kaur*  
 10/21/09  
 SIGNATURE  
 DATE

FUND/APPROPRIATION	AMOUNT
32- 9999- 0000- 0000- 2-288305	33,500.00
	33,500.00

**CLAIMANT'S CERTIFICATION AND DECLARATION**

I do solemnly declare and certify under the penalties of law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons with the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

X

SIGNATURE Joseph Punia

10/19/09 Authorized Agent

DATE

TITLE

**PURCHASE ORDER AUTHORIZATION**

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

*Robert J. Motas*

10/13/2009

PURCHASING AGENT

DATE

DATE PAID

CHECK NO

VOUCHER COPY-SIGN AT X AND RETURN FOR PAYMENT

Page 1 of 1

# STATE OF NEW JERSEY NON-RESIDENTIAL DEVELOPMENT FEE CLAIM FORM

## SECTION A (To be completed by developer):

### Developer

Name of Developer:	S/K Stouts 3 Associates, LLC		
Address:	P.O. Box 6872 (520 Route 22) Bridgewater, NJ 08807-6872		
Phone:	908-725-8100	Fax:	575-2239
E-mail:	joep@skaffiliates.com		

### Property Location

County:	Middlesex	Municipality:	South Brunswick	Block:	205	Lot:	1.021	Qual.:	C0003
Street Address:	49 Souts Lane								
Construction Permit Application Number:	2007-0935								

### Approval Dates

Date on which developer received preliminary site plan approval (If applicable)	July 8, 1986
Date on which developer received final site plan approval (If applicable)	July 8, 1986
If approval was granted prior to July 17, 2008, development fee % required at approval	\$0.50 % A1
If approval was granted prior to July 17, 2008, fee amount (E5 or F5 from Form NRDF x A1 above)	\$ 20,000.00 A2
Date on which developer was referred to a planning board by the state, a governing body, or other public agency for review (If applicable)	
Date on which building permit was issued (If applicable)	May 30, 2007
Date on which final Certificate of Occupancy was issued (If applicable) Attach copy of final Certificate of Occupancy.	June 11, 2009

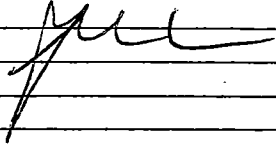
### Payment(s)

	Amount	Date	Time of Payment (check one)		Method of Payment (check one)			
			Building Permit	CO	Cash	Check	Online	Money Order
A3	\$ 10,000	May 23, 2007	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A4	\$ 43,500	June 2009	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A5	\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Payments:	\$ 53,500	A6 (A3+A4+A5)
Amount Committed Prior to July 17, 2008	\$ 20,000	A7 (From A2)
<b>Amount of Claim</b>	<b>\$ 33,500</b>	<b>A8 (A6 - A7)</b>

**Attach copy of Receipt or Certificate of Payment. No claim will be accepted without proof of payment attached.**

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer/Claimant:			
Name:	Joseph Punia		
Title:	Authorized Agent	Date:	October 19, 2009

## SECTION B

Total Payments Received:	\$	B1
Amount Committed Prior to July 17, 2008	\$	B2
Amount of Claim	\$	B3 (B1 - B2)
Signature:		
Name:		
Title:		Date:

**STATE OF NEW JERSEY**  
**NON-RESIDENTIAL DEVELOPMENT FEE CERTIFICATION/EXEMPTION**

**SECTION A (To be completed by developer):**

**Developer**

Name of Developer:	S/K STOUTS 3 ASSOCIATES, LLC		
Address:	520 ROUTE 22 E. BRIDGEWATER, NJ 08807		
Phone:	908.725.8100	Fax:	
E-mail:			

**Property Location**

County:		Municipality:		Block:	205	Lot:	1.021	Qual.:	C0003
Street Address:	49 STOUTS LANE (BUILDING # 2)								
Construction Permit Application Number:	20070935								
Date on which Developer first sought construction or demolition permit (section 37 of P.L. 2008 c. 46)									

**Exemption Category [Section Citation of P.L. 2008 c. 46] Check one if appropriate**

<input type="checkbox"/> Non-profit Educational Purposes [35b]	<input type="checkbox"/> Transit Hub [35b.(4)]
<input type="checkbox"/> House of Worship [35b]	<input type="checkbox"/> Transit Village [35b.(6)]
<input type="checkbox"/> Parking lots and structures [35b.(1)]	<input type="checkbox"/> Transit Hub-Light Rail [35b.(5)]
<input type="checkbox"/> Non-profit hospital relocation or improvement [35b.(3)]	<input type="checkbox"/> Public amenity (recreational, community, senior centers) [35b.(2)] (Attach Planning Board approval)

**Non-exempt status [Section citation] Check one if appropriate**

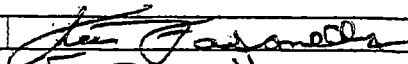
<input checked="" type="checkbox"/> Prior payment or commitment for low and moderate income housing [37c]	Amount paid:	\$ 10,000.00
<input type="checkbox"/> Non-residential planned development, subject to a development or redevelopment agreement entitled to a 1% fee [37a.(2)]		
<input type="checkbox"/> Full Fee Due (2.5%)		

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer:				
Name:	JOSEPH P...			
Title:	PROJECT MANAGER		Date:	

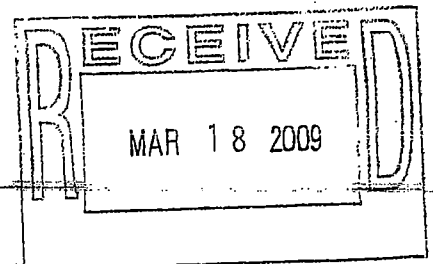
**SECTION B (To be completed by assessor):**

	Estimated			Final	
Assessed Value	\$	E1		\$ 1,010,500	F1
Director's Ratio	%	E2		47.22%	F2
Equalized Assessed Value	\$	E3		\$ 2,140,000	F3
Existing Equalized Assessed Value	\$	E4		\$ -0-	F4
Amount on Which Fee is Calculated	\$	E5 (E3-E4)		\$ 2,140,000	F5 (F3-F4)
Non-residential Development Fee	\$	E6 (E5 X 2.5%)		\$ 53,500	F6 (F5 X 2.5%)

Signature of Assessor:				
Name:	Keith Fasanella		Exempt:	<input type="checkbox"/>
Date:	4/2/09			

**SECTION C (To be completed by municipality)**

Payment Amount:	\$	Amount should equal E6 or F6
Payment received by ( name):		
Signature:		
Name:		
Title:		Date:



**CERTIFICATION OF FUNDS**

I hereby certify the funds are available and encumbered.

*[Signature]*

FINANCE DEPARTMENT

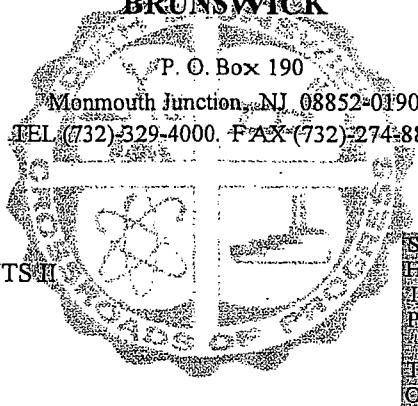
PRINT DATE: 12/18/2009

VENDOR NO: 511458

TRIPLE NET INVESTMENTS II  
171 ROUTE 173  
SUITE 201  
ASBURY PARK, NJ 08802

**TOWNSHIP OF SOUTH BRUNSWICK**

P. O. Box 190  
Monmouth Junction, NJ 08852-0190  
TEL (732) 329-4000. FAX (732) 274-8864.



**VOUCHER/PURCHASE ORDER**

No. **200904189**

THIS NUMBER MUST APPEAR ON ALL PACKAGES, PAPERS AND CORRESPONDENCE

STATE CONTRACT ☐ No.

PURCHASE ORDER DATE: 12/18/2009

TWP. ATTORNEY'S OFFICE  
SOUTH BRUNSWICK TOWNSHIP  
540 RIDGE ROAD  
MONMOUTH JUNCTION, NJ 08852

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	1. NON-RESIDENTIAL DEVELOPMENT FEE REFUND		253,007.95
			253,007.95

**NOTICE TO VENDOR**

NO CHANGES MAY BE MADE IN ANY PROVISION OF THIS PURCHASE ORDER WITHOUT THE WRITTEN NOTICE TO THAT EFFECT ISSUED BY THE TOWNSHIP. SUBSTITUTIONS MUST NOT BE MADE. IF UNABLE TO FILL ORDERS EXACTLY IN ACCORDANCE WITH QUANTITY, DESCRIPTION AND PRICE - NOTIFY TOWNSHIP IMMEDIATELY

CONTRACT ORDERS ARE SUBJECT TO ALL TERMS AND CONDITIONS OF THE ACCEPTED BID AND EXECUTED CONTRACT. INFORMAL AWARDS (OPEN MARKET ORDERS RESULTING FROM ADVERTISED PROPOSALS) ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE ACCEPTED BID. NO ORDER VALID UNLESS SIGNED BELOW.

**APPROVAL FOR PAYMENT**

**SIGN AND RETURN VOUCHER FOR PAYMENT**

DATE TWP. MANAGER DATE FINANCE

THIS PURCHASE IS EXEMPT BY STATUTE FROM PAYMENT OF ALL OR FEDERAL, STATE AND MUNICIPAL EXCISE, SALES, OR OTHER TAXES

EXEMPT FROM N.J. SALES TAX #22- 6002306

**DEPARTMENT HEAD CERTIFICATION**

I, having knowledge of the facts certify that the materials and supplies have been received or the services rendered; said certifications being based on signed delivery slips or other reasonable procedures.

SIGNATURE

DATE

FUND/APPROPRIATION	AMOUNT
32- 9999- 0000- 0000- 2-288305	253,007.95
	253,007.95

**CLAIMANT'S CERTIFICATION AND DECLARATION**

I do solemnly declare and certify under the penalties of law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons with the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

X

SIGNATURE

DAVID S. GORDON  
Attorney at Law

DATE

TITLE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

*[Signature]*

12/18/2009

PURCHASING AGENT

DATE

DATE PAID

CHECK NO

**STATE OF NEW JERSEY  
NON-RESIDENTIAL DEVELOPMENT FEE CLAIM FORM**

**SECTION A (To be completed by developer):**

**Developer**

Name of Developer:	Frank A. Greek + Son*		
Address:	33 Gathers Lane, East Brunswick, NJ 08816		
Phone:	732-257-7353	Fax:	732-257-9644 E-mail: frankg@greekdevelopment.com

**Property Location**

County:	Middlesex	Municipality:	South Brunswick	Block:	15.03	Lot:	9.061	Qual.:	
Street Address:	140 Dock Corner Road								
Construction Permit Application Number:	2008 0652								

**Approval Dates**

Date on which developer received preliminary site plan approval (If applicable)	January 16, 2008
Date on which developer received final site plan approval (If applicable)	January 16, 2008
If approval was granted prior to July 17, 2008, development fee % required at approval	0% A1
If approval was granted prior to July 17, 2008, fee amount (E5 or F5 from Form NRDF x A1 above)	\$275,822.00 A2
Date on which developer was referred to a planning board by the state, a governing body, or other public agency for review (If applicable)	
Date on which building permit was issued (If applicable)	April 29, 2008
Date on which final Certificate of Occupancy was issued (If applicable) Attach copy of final Certificate of Occupancy.	December 12, 2008

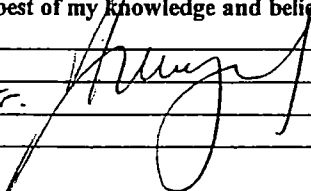
**Payment(s)**

	Amount	Date	Time of Payment (check one)		Method of Payment (check one)			
			Building Permit	CO	Cash	Check	Online	Money Order
A3	\$295,873.00	April 29, 2008	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A4	\$393,682.00	December 30, 2008	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A5	\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Payments:	\$ 689,555.00	A6 (A3+A4+A5)
Amount Committed Prior to July 17, 2008	\$ 295,873.00	A7 (From A2)
Amount of Claim	\$ 393,682.00	A8 (A6 - A7)

Attach copy of Receipt or Certificate of Payment. No claim will be accepted without proof of payment attached.

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer/Claimant:			
Name:	Frank A. Greek, Jr.		
Title:	President	Date:	11/23/09

**SECTION B**

Total Payments Received:	\$	B1
Amount Committed Prior to July 17, 2008	\$	B2
Amount of Claim	\$	B3 (B1 - B2)
Signature:		
Name:		
Title:		Date:

\* as contractor and agent for property owners Triple Net Investments II, L.P., Frank Greek Company SB-535, LLC, RCM Properties, LLC and South Brunswick EAT Holdings, LLC.

**STATE OF NEW JERSEY  
NON-RESIDENTIAL DEVELOPMENT FEE CERTIFICATION/EXEMPTION**

**SECTION A (To be completed by developer):**

**Developer**  
 Name of Developer: Frank Hupp & Son  
 Address: 33 Patton Rd E. Brunswick NJ  
 Phone: 732-257-7512 Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Property Location**  
 County: Middlesex Municipality: South Brunswick Block: 15.1 Lot: 9068 Qual.: \_\_\_\_\_  
 Street Address: 140 Mills Corner Rd  
 Construction Permit Application Number: 0602-08  
 Date on which Developer first sought construction or demolition permit (Section 37 of P.L. 2008 c. 46): 2/3/08

**Exemption Category [Section Citation of P.L. 2008 c. 46] Check one if appropriate**

<input type="checkbox"/> Non-profit Educational Purposes [35b]	<input type="checkbox"/> Transit Hub [35b.(4)]
<input type="checkbox"/> House of Worship [35b]	<input type="checkbox"/> Transit Village [35b.(6)]
<input type="checkbox"/> Parking lots and structures [35b.(1)]	<input type="checkbox"/> Transit Hub-Light Rail [35b.(5)]
<input type="checkbox"/> Non-profit hospital relocation or improvement [35b.(3)]	<input type="checkbox"/> Public amenity (recreational, community, senior centers) [35b.(2)] (Attach Planning Board approval)

**Non exempt status [Section citation] Check one if appropriate**

☒ Prior payment or commitment for low and moderate income housing [37c] Amount paid: \$ 295,873 -  
☐ Non-residential planned development, subject to a development or redevelopment agreement entitled to a 1% fee [37a.(2)]  
☐ Full Fee Due (2.5%)

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer: Jack Surber  
 Name: JACK SURBER  
 Title: SUPERINTENDENT Date: 12/10/08

**SECTION B (To be completed by assessor):**

*\*Update\**

	Estimated		Final
Assessed Value	\$	E1	<u>\$ 14,458,400</u> F1 <u>12,974,700</u>
Director's Ratio	%	E2	<u>47.04 %</u> F2
Equalized Assessed Value	\$	E3	<u>\$ 30,732,200</u> F3 <u>27,582,200</u>
Existing Equalized Assessed Value	\$	E4	<u>\$ -0-</u> F4 <u>-0-</u>
Amount on Which Fee is Calculated	\$	E5 (E3-E4)	<u>\$ 30,732,200</u> F5 (F3-F4) <u>27,582,200</u>
Non-residential Development Fee	\$	E6 (E5 X 2.5%)	<u>\$ 768,305</u> F6 (F5 x 2.5%) <u>689,555</u>

Signature of Assessor: Keith Cassanella  
 Name: Keith Cassanella Exempt: ☐  
 Date: 12/10/08

**SECTION C (To be completed by municipality):**

Payment Amount: \$ \_\_\_\_\_ Amount should equal E6 or F6  
 Payment received by ( name): \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_ Date: \_\_\_\_\_

**CERTIFICATION OF FUNDS**

I hereby certify the funds are available and encumbered.

*[Signature]*

FINANCE DEPARTMENT

PRINT DATE: 10/13/2009

VENDOR NO: 82586

**TOWNSHIP OF SOUTH BRUNSWICK**

P.O. Box 190  
 Monmouth Junction, NJ 08852-0190  
 TEL (732)-329-4000. FAX (732)-274-8864.

**VOUCHER/PURCHASE ORDER**

No. **200903506**

THIS NUMBER MUST APPEAR ON ALL PACKAGES, PAPERS AND CORRESPONDENCE

STATE CONTRACT ☐ No.

PURCHASE ORDER DATE: 10/13/2009

DELUXE CAR WASH, LLC  
 1420 KEARNEY DR  
 NORTH BRUNSWICK, NJ 08902

TWP. ATTORNEY'S OFFICE  
 SOUTH BRUNSWICK TOWNSHIP  
 540 RIDGE ROAD  
 MONMOUTH JUNCTION, NJ 08852

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	1. NON-RESIDENTIAL DEVELOPMENT FEE REFUND		11,308.00
			11,308.00

**NOTICE TO VENDOR**

NO CHANGES MAY BE MADE IN ANY PROVISION OF THIS PURCHASE ORDER WITHOUT THE WRITTEN NOTICE TO THAT EFFECT ISSUED BY THE TOWNSHIP. SUBSTITUTIONS MUST NOT BE MADE. IF UNABLE TO FILL ORDERS EXACTLY IN ACCORDANCE WITH QUANTITY, DESCRIPTION AND PRICE - NOTIFY TOWNSHIP IMMEDIATELY

CONTRACT ORDERS ARE SUBJECT TO ALL TERMS AND CONDITIONS OF THE ACCEPTED BID AND EXECUTED CONTRACT. INFORMAL AWARDS (OPEN MARKET ORDERS RESULTING FROM ADVERTISED PROPOSALS) ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE ACCEPTED BID. NO ORDER VALID UNLESS SIGNED BELOW.

**DEPARTMENT HEAD CERTIFICATION**

I, having knowledge of the facts certify that the materials and supplies have been received or the services rendered; said certifications being based on signed delivery slips or other reasonable procedures.

*[Signature]*  
 10/14/09  
 SIGNATURE  
 DATE

**APPROVAL FOR PAYMENT**

**SIGN AND RETURN VOUCHER FOR PAYMENT**

DATE TWP. MANAGER DATE FINANCE

THIS PURCHASE IS EXEMPT BY STATUTE FROM PAYMENT OF ALL OR FEDERAL, STATE AND MUNICIPAL EXCISE, SALES, OR OTHER TAXES

**EXEMPT FROM N.J. SALES TAX #22- 6002306**

FUND APPROPRIATION	AMOUNT
32- 9999- 0000- 0000- 2-288305	11,308.00
	11,308.00

**CLAIMANT'S CERTIFICATION AND DECLARATION**

I do solemnly declare and certify under the penalties of law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons with the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

*[Signature]* 10/15/09  
 SIGNATURE DATE TITLE

**PURCHASE ORDER AUTHORIZATION**

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

*[Signature]* 10/13/2009  
 PURCHASING AGENT DATE

DATE PAID

CHECK NO



**STATE OF NEW JERSEY  
NON-RESIDENTIAL DEVELOPMENT FEE CLAIM FORM**

**SECTION A (To be completed by developer):**

**Developer**

Name of Developer:	Deluxe Car Wash LLC / Frank Casselle Owner/President		
Address:	980 GEORGE RD. Monmouth Jct. New Jersey 08852		
Phone:	732-821-0813	Fax:	732-821-0814
E-mail:	CasselleJ@AOL.com		

**Property Location**

County:	Middlesex	Municipality:	South Brunswick	Block:	29.01	Lot:	39.01	Qual.:	
Street Address:	980 GEORGE RD. Monmouth Jct. NJ. 08852								
Construction Permit Application Number:	08-0676 & 08-0677								

**Approval Dates**

Date on which developer received preliminary site plan approval (If applicable)	June 7-2006
Date on which developer received final site plan approval (If applicable)	
If approval was granted prior to July 17, 2008, development fee % required at approval	1% A1
If approval was granted prior to July 17, 2008, fee amount (E5 or F5 from Form NRDF x A1 above)	22463.00 A2
Date on which developer was referred to a planning board by the state, a governing body, or other public agency for review (If applicable)	
Date on which building permit was issued (If applicable)	5-5-08
Date on which final Certificate of Occupancy was issued (If applicable) Attach copy of final Certificate of Occupancy.	2-23-09

**Payment(s)**

	Amount	Date	Time of Payment (check one)		Method of Payment (check one)			
			Building Permit	CO	Cash	Check	Online	Money Order
A3	\$ 11,155.00	5/3/08	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A4	\$ 11,308.00	4/5/08	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A5	\$		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Payments:	\$ 22463.00	A6 (A3+A4+A5)
Amount Committed Prior to July 17, 2008.	\$ 11,155.00	A7 (From A2)
Amount of Claim	\$ 11,308.00	A8 (A6 - A7)

Attach copy of Receipt or Certificate of Payment. No claim will be accepted without proof of payment attached.

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer/Claimant:	Francis Casselle		
Name:	Francis Casselle		
Title:	President/owner	Date:	10/16/09

**SECTION B**

Total Payments Received:	\$	B1
Amount Committed Prior to July 17, 2008	\$	B2
Amount of Claim	\$	B3 (B1 - B2)
Signature:		
Name:		
Title:		Date:

**STATE OF NEW JERSEY  
NON-RESIDENTIAL DEVELOPMENT FEE CERTIFICATION/EXEMPTION**

**SECTION A (To be completed by developer):**

**Developer**

Name of Developer: <u>FRANCIS CASALE / Deluxe Car Wash LLC</u>			
Address: <u>1420 KERRNEY DR NORTH BRUNSWICK N.J. 08902</u>			
Phone: <u>908 682-2640</u>	Fax: <u>257-1137</u>	E-mail: <u>CASALEJ@AOL.COM</u>	

**Property Location**

County: <u>Middlesex</u>	Municipality: <u>South Brunswick</u>	Block: <u>29.01</u>	Lot: <u>39.01</u>	Qual.: <u></u>
Street Address: <u>480 Georges Rd.</u>				
Construction Permit Application Number: <u>08-0676</u>				
Date on which Developer first sought construction or demolition permit (section 37 of P.L. 2008 c. 46)				<u>1-9-08</u>

**Exemption Category [Section Citation of P.L. 2008 c. 46] Check one if appropriate**

<input type="checkbox"/> Non-profit Educational Purposes [35b]	<input type="checkbox"/> Transit Hub [35b.(4)]
<input type="checkbox"/> House of Worship [35b]	<input type="checkbox"/> Transit Village [35b.(6)]
<input type="checkbox"/> Parking lots and structures [35b.(1)]	<input type="checkbox"/> Transit Hub-Light Rail [35b.(5)]
<input type="checkbox"/> Non-profit hospital relocation or improvement [35b.(3)]	<input type="checkbox"/> Public amenity (recreational, community, senior centers) [35b.(2)] (Attach Planning Board approval)

**Non exempt status [Section citation] Check one if appropriate**

<input checked="" type="checkbox"/> Prior payment or commitment for low and moderate income housing [37c]	Amount paid: <u>\$ 11,000.00</u>
<input type="checkbox"/> Non-residential planned development, subject to a development or redevelopment agreement entitled to a 1% fee [37a.(2)]	
<input type="checkbox"/> Full Fee Due (2.5%)	

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer: <u>Francis Casale</u>	
Name: <u>FRANCIS CASALE</u>	Date: <u>10/22/08</u>
Title: <u>OWNER</u>	

**SECTION B (To be completed by assessor):**

	Estimated			Final	
Assessed Value	\$	E1		\$ 524,700	F1
Director's Ratio		% E2		47.64 %	F2
Equalized Assessed Value	\$	E3		\$ 1,115,400	F3
Existing Equalized Assessed Value	\$	E4		\$ -0-	F4
Amount on Which Fee is Calculated	\$	E5 (E3-E4)		\$ 1,115,400	F5 (F3-F4)
Non-residential Development Fee	\$	E6 (E5 X 2.5%)		\$ 22,308	F6 (F5 x 2.5%)

Signature of Assessor: <u>Keith Fasanella</u>	
Name: <u>Keith Fasanella</u>	Exempt: <input type="checkbox"/>
Date: <u>10/22/08</u>	

**SECTION C (To be completed by municipality)**

Payment Amount: \$	Amount should equal E6 or F6
Payment received by ( name):	
Signature:	
Name:	
Title:	Date:

**CERTIFICATION OF FUNDS**

I hereby certify the funds are available and encumbered.

*Gayle P. Mon*

FINANCE DEPARTMENT

PRINT DATE: 10/13/2009

VENDOR NO: 248552

**TOWNSHIP OF SOUTH BRUNSWICK**

P. O. Box 190  
 Monmouth Junction, NJ 08852-0190  
 TEL (732)-329-4000. FAX (732)-274-8864.

**VOUCHER/PURCHASE ORDER**

No. **200903513**

THIS NUMBER MUST APPEAR ON ALL PACKAGES, PAPERS AND CORRESPONDENCE

STATE CONTRACT ☐ No.

PURCHASE ORDER DATE: 10/13/2009

**VENDOR**

JONES DEVELOPMENT CO., LL  
 4520 MADISON AVE SUITE  
 KANSAS CITY, MO 64111

**SHIP TO**

TWP. ATTORNEY'S OFFICE  
 SOUTH BRUNSWICK TOWNSHIP  
 540 RIDGE ROAD  
 MONMOUTH JUNCTION, NJ 08852

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	1. NON-RESIDENTIAL DEVELOPMENT FEE REFUND		423,361.00
			423,361.00

*David J. Jones*  
 10/22/09

**NOTICE TO VENDOR**

NO CHANGES MAY BE MADE IN ANY PROVISION OF THIS PURCHASE ORDER WITHOUT THE WRITTEN NOTICE TO THAT EFFECT ISSUED BY THE TOWNSHIP. SUBSTITUTIONS MUST NOT BE MADE. IF UNABLE TO FILL ORDERS EXACTLY IN ACCORDANCE WITH QUANTITY, DESCRIPTION AND PRICE - NOTIFY TOWNSHIP IMMEDIATELY

CONTRACT ORDERS ARE SUBJECT TO ALL TERMS AND CONDITIONS OF THE ACCEPTED BID AND EXECUTED CONTRACT. INFORMAL AWARDS (OPEN MARKET ORDERS RESULTING FROM ADVERTISED PROPOSALS) ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE ACCEPTED BID. NO ORDER VALID UNLESS SIGNED BELOW.

**DEPARTMENT HEAD CERTIFICATION**

I, having knowledge of the facts certify that the materials and supplies have been received or the services rendered; said certifications being based on signed delivery slips or other reasonable procedures.

*[Signature]*  
 SIGNATURE  
 10/13/09  
 DATE

**APPROVAL FOR PAYMENT**

**SIGN AND RETURN VOUCHER FOR PAYMENT**

DATE TWP. MANAGER DATE FINANCE

THIS PURCHASE IS EXEMPT BY STATUTE FROM PAYMENT OF ALL OR FEDERAL, STATE AND MUNICIPAL EXCISE, SALES, OR OTHER TAXES

**EXEMPT FROM N.J. SALES TAX #22- 6002306**

FUND/APPROPRIATION	AMOUNT
32- 9999- 0000- 0000- 2-288305 <i>Ypd 11/12/09</i> <i>ch # 56709</i>	423,361.00
	423,361.00

**CLAIMANT'S CERTIFICATION AND DECLARATION**

I do solemnly declare and certify under the penalties of law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons with the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

X *[Signature]* 10/29/09  
 SIGNATURE Kevin Jones, Managing Member DATE TITLE

**PURCHASE ORDER AUTHORIZATION**

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

*[Signature]* 10/13/2009  
 PURCHASING AGENT DATE

DATE PAID

CHECK NO

VOUCHER COPY-SIGN AT X AND RETURN FOR PAYMENT

# NON-RESIDENTIAL DEVELOPMENT FEE CLAIM FORM

## SECTION A (To be completed by developer):

### Developer

Name of Developer:		Jones Brunswick LLC			
Address:		c/o Farer Fersko PA, 600 South Avenue, P.O. Box 580, Westfield, New Jersey 07091			
Phone:	908-789-8550	Fax:	908-789-8660	E-mail:	jhague@farerlaw.com

### Property Location

County:	Somerset	Municipality:	South Brunswick	Block:	12.02	Lot:	13.04	Qual.:	
Street Address:		65 Stults Road							
Construction Permit Application Number:									

### Approval Dates

Date on which developer received preliminary site plan approval (If applicable)	
Date on which developer received final site plan approval (If applicable)	June 20, 2007
If approval was granted prior to July 17, 2008, development fee % required at approval	N/A A1
If approval was granted prior to July 17, 2008, fee amount (E5 or F5 from Form NRDF x A1 above)	N/A A2
Date on which developer was referred to a planning board by the state, a governing body, or other public agency for review (If applicable)	
Date on which building permit was issued (If applicable)	
Date on which final Certificate of Occupancy was issued (If applicable) Attach copy of final Certificate of Occupancy.	10/16/08

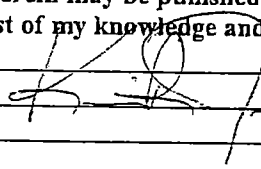
### Payment(s)

	Amount	Date	Time of Payment (check one)		Method of Payment (check one)			
			Building Permit	CO	Cash	Check	Online	Money Order
A3	\$ 56,357	11/05/07	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A4	\$ 56,357	07/15/08	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A5	\$423,361	10/10/08	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Total Payments:	\$536,075	A6 (A3+A4+A5)
Amount Committed Prior to July 17, 2008	\$112,714 - See letter of 8-14-09 attached	A7 (From A2)
Amount of Claim	\$423,361	A8 (A6 - A7)

Attach copy of Receipt or Certificate of Payment. No claim will be accepted without proof of payment attached.

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer/Claimant:			
Name:	Kevin Jones		
Title:	Managing Member	Date:	September 2, 2009

## SECTION B

Total Payments Received:	\$	B1
Amount Committed Prior to July 17, 2008	\$	B2
Amount of Claim	\$	B3 (B1 - B2)
Signature:		
Name:		
Title:		Date:

**STATE OF NEW JERSEY**  
**NON-RESIDENTIAL-DEVELOPMENT FEE CERTIFICATION/EXEMPTION**

**SECTION A (To be completed by developer):**

Developer  
 Name of Developer: JONES BROWNSHIRE, L.L.C.  
 Address: 4520 MADISON, SUITE 100, KANSAS CITY MO, 64111  
 Phone: 816-389-5700 Fax: 816-389-5701 E-mail: JMARKET@JONESBROWNSHIRE.COM

Property Location  
 County: MIDDLESEX Municipality: SOUTH BROWNSHIRE Block: 12.02 Lot: 13.04 Qual.: 15.011  
 Street Address: 65 STULTS RD, BLDG B, DAYTON, NJ 08810  
 Construction Permit Application Number: \_\_\_\_\_  
 Date on which Developer first sought construction or demolition permit (section 37 of c. P.L. 2008) \_\_\_\_\_

Exemption Category [Section Citation of P.L. 2008 c. ] Check one if appropriate

<input type="checkbox"/> Non-profit Educational Purposes [35b]	<input type="checkbox"/> Transit Hub [35b.(4)]
<input type="checkbox"/> House of Worship [35b]	<input type="checkbox"/> Transit Village [35b.(6)]
<input type="checkbox"/> Parking lots and structures [35b.(1)]	<input type="checkbox"/> Transit Hub-Light Rail [35b.(5)]
<input type="checkbox"/> Non-profit hospital relocation or improvement [35b.(3)]	<input type="checkbox"/> Public amenity (recreational, community, senior centers) [35b.(2)] (Attach Planning Board approval)

Non exempt status [Section citation] Check one if appropriate

<input checked="" type="checkbox"/> Prior payment or commitment for low and moderate income housing [37c]	Amount paid: <u>\$112,714.00</u>
<input type="checkbox"/> Non-residential planned development, subject to a development or redevelopment agreement entitled to a 1% fee [37a.(2)]	
<input type="checkbox"/> Full Fee Due (2.5%)	

I, the undersigned, understand that this declaration and its contents may be disclosed or provided to the State of New Jersey and that any false statement contained herein may be punished by fine, imprisonment, or both. I further declare that I have examined this declaration and, to the best of my knowledge and belief, it is true, correct and complete.

Signature of Developer: [Signature]  
 Name: KEVIN R. JONES  
 Title: MANAGING MEMBER Date: 8-11-08


**SECTION B (To be completed by assessor):**

	Estimated	Final
Assessed Value	\$ <u>12,936,800</u> E1	\$ <u>12,936,800</u> F1
Director's Ratio	% <u>47.04</u> E2	% <u>47.04</u> F2
Equalized Assessed Value	\$ <u>27,501,700</u> E3	\$ <u>27,501,700</u> F3
Existing Equalized Assessed Value	\$ <u>6,088,700</u> E4	\$ <u>6,088,700</u> F4
Amount on Which Fee is Calculated	\$ <u>21,413,000</u> E5 (E3-E4)	\$ <u>21,413,000</u> F5 (F4-F3)
Non-residential Development Fee	\$ <u>536,075</u> E6 (E5 X 2.5%)	\$ <u>536,075</u> F6 (F5 x 2.5%)

Signature of Assessor: [Signature]  
 Name: Keith Fasanella Exempt: ☐  
 Date: 8/18/08

**SECTION C (To be completed by municipality):**

Payment Amount: \$ \_\_\_\_\_ Amount should equal E6 or F6  
 Payment received by ( name): \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_ Date: \_\_\_\_\_

<b>CERTIFICATION OF FUNDS</b>
I hereby certify the funds are available and encumbered.

FINANCE DEPARTMENT
PRINT DATE: 11/25/2009

VENDOR NO: 472010

**TOWNSHIP OF SOUTH BRUNSWICK**  
P. O. Box 190  
Monmouth Junction, NJ 08852-0190  
TEL: (732)-329-4000 FAX (732)-274-8864

<b>VOUCHER/PURCHASE ORDER</b>
No. <b>200903995</b>
THIS NUMBER MUST APPEAR ON ALL PACKAGES, PAPERS AND CORRESPONDENCE

STATE CONTRACT ☐ No.

PURCHASE ORDER DATE: 11/25/2009

**SEAGIS 11 COMMERCE COURT**  
**100 FRONT STREET**  
**SUITE 1370**  
**WEST CONSHOHOCKEN, PA 19428**

**TWP. ATTORNEY'S OFFICE**  
**SOUTH BRUNSWICK TOWNSHIP**  
**540 RIDGE ROAD**  
**MONMOUTH JUNCTION, NJ 08852**

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	1. NON-RESIDENTIAL DEVELOPMENT FEE REFUND		84,678.00
			84,678.00

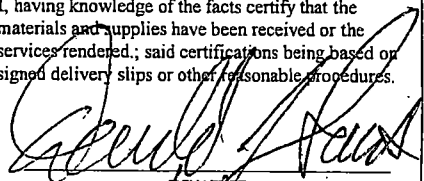
**NOTICE TO VENDOR**

NO CHANGES MAY BE MADE IN ANY PROVISION OF THIS PURCHASE ORDER WITHOUT THE WRITTEN NOTICE TO THAT EFFECT ISSUED BY THE TOWNSHIP. SUBSTITUTIONS MUST NOT BE MADE. IF UNABLE TO FILL ORDERS EXACTLY IN ACCORDANCE WITH QUANTITY, DESCRIPTION AND PRICE - NOTIFY TOWNSHIP IMMEDIATELY

CONTRACT ORDERS ARE SUBJECT TO ALL TERMS AND CONDITIONS OF THE ACCEPTED BID AND EXECUTED CONTRACT. INFORMAL AWARDS (OPEN MARKET ORDERS RESULTING FROM ADVERTISED PROPOSALS) ARE SUBJECT TO THE TERMS AND CONDITIONS OF THE ACCEPTED BID. NO ORDER VALID UNLESS SIGNED BELOW.

**DEPARTMENT HEAD CERTIFICATION**

I, having knowledge of the facts certify that the materials and supplies have been received or the services rendered; said certifications being based on signed delivery slips or other reasonable procedures.

  
SIGNATURE  
12/3/09  
DATE

**APPROVAL FOR PAYMENT**

**SIGN AND RETURN VOUCHER FOR PAYMENT**

DATE TWP. MANAGER DATE FINANCE

THIS PURCHASE IS EXEMPT BY STATUTE FROM PAYMENT OF ALL OR FEDERAL, STATE AND MUNICIPAL EXCISE, SALES, OR OTHER TAXES

**EXEMPT FROM N.J. SALES TAX #22- 6002306**

FUND/APPROPRIATION	AMOUNT
32- 9999- 0000- 0000- 2-288305	84,678.00
	84,678.00


**CLAIMANT'S CERTIFICATION AND DECLARATION**

I do solemnly declare and certify under the penalties of law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons with the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

X  12/2/09 Partner  
SIGNATURE DATE TITLE

**PURCHASE ORDER AUTHORIZATION**

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

 11/25/2009  
PURCHASING AGENT DATE

DATE PAID

CHECK NO

VOUCHER COPY-SIGN AT X AND RETURN FOR PAYMENT

Page 1 of 1

Thank you for your prompt response to my inquiry. Is there a date by which you will know if money is available?

As you know, N.J.S.A. 40:55D-8.8(e) indicates that an eligible municipality "shall be reimbursed from the funds available through the appropriation made into the "New Jersey Affordable Housing Trust Fund" pursuant to N.J.S.A. 52:27D-320.1 within 30 days of the municipality providing written notice to the Council on Affordable Housing." South Brunswick's written notice to COAH was March 23, 2010. Accordingly, the reimbursement is long overdue.

Thank you for your considerations in this matter.

Donald J. Sears  
Director of Law  
Township of South Brunswick

-----Original Message-----

From: Obi, Ngozi [<mailto:Ngozi.Obi@dca.state.nj.us>]  
Sent: Friday, November 19, 2010 3:34 PM  
To: Sears, Don  
Cc: Grifa, Lori; Fischetti, Gina  
Subject: RE: Non-residential development fee claims

Dear Mr. Sears,

COAH is in receipt of your submission seeking reimbursement of NRDF funds. COAH acknowledges that South Brunswick Township is eligible for the requested refund pursuant to the NRDF requirements. However, at this time, COAH is awaiting confirmation that the necessary money for refunds of NRDF fees are available. If you have any questions, please do not hesitate to contact me.

Thanks,  
Ngozi

Ngozi Obi  
Assistant Planner  
New Jersey Council on Affordable Housing  
101 South Broad Street  
PO Box 813  
Trenton, NJ 08625-0813  
Phone: (609) 633-0597  
Fax : (609) 633-6056  
[Ngozi.Obi@dca.state.nj.us](mailto:Ngozi.Obi@dca.state.nj.us)

Confidentiality Note: This electronic message transmission contains information from the New Jersey Council on Affordable Housing (COAH) which may be confidential, privileged or otherwise protected from disclosure. The information is intended only for the use of the individual to whom it was originally addressed. Any disclosure, copying, distribution or use of the contents of this information without prior authorization from the original author is prohibited.

If you have received this electronic transmission in error, please notify us immediately by telephone at (609) 292-3000, or by return electronic mail, and destroy the original message and all copies.

-----Original Message-----

From: Sears, Don [<mailto:dsears@sbtnj.net>]  
Sent: Friday, November 19, 2010 3:03 PM  
To: Obi, Ngozi  
Cc: Grifa, Lori  
Subject: RE: Non-residential development fee claims

Dear Ms. Obi:

I have not heard from you for several months on the status of the Township's refund request. Has there been a determination whether this money will be paid to the Township or not? Please let me know as soon as possible.

Thank you.

Donald J. Sears  
Director of Law  
Township of South Brunswick

-----Original Message-----

From: Obi, Ngozi [<mailto:Ngozi.Obi@dca.state.nj.us>]  
Sent: Tuesday, August 17, 2010 8:17 AM  
To: Sears, Don  
Subject: RE: Non-residential development fee claims

Dear Mr. Sears -

Thank you for your submission of information on South Brunswick request for NRDF refunds. At this time, COAH is awaiting confirmation that money for refunds of NRDF fees are available. It may have been affected by the Governor's Executive Order #14 to balance the remainder of the FY 2010 budget. Feel free to contact our office if you should have any additional questions.

Thanks,  
Ngozi

Ngozi Obi  
Assistant Planner  
New Jersey Council on Affordable Housing  
101 South Broad Street  
PO Box 813  
Trenton, NJ 08625-0813  
Phone: (609) 633-0597  
Fax : (609) 633-6056  
[Ngozi.Obi@dca.state.nj.us](mailto:Ngozi.Obi@dca.state.nj.us)